

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation American Action Network		3. FEC Identification Number C C90011230
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1747 Pennsylvania Avenue, NW 5th Floor		
(c) City, State and ZIP Code Washington DC 20006		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 391154.06

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Caleb Crosby	Caleb Crosby	10/17/2014

[Electronically Filed]

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Action Network

Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group		Date of Public Distribution/Dissemination 10 / 15 / 2014	
Mailing Address 815 Slaters Lane		Amount 308680.38	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 001
Purpose of Expenditure TV/media placement	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Garcia		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 976329.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Arena Communications		Date of Public Distribution/Dissemination 10 / 15 / 2014	
Mailing Address 1780 Sequoia Vista Circle		Amount 12667.00	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 002
Purpose of Expenditure Direct mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Kirkpatrick		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12667.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Push Digital		Date of Public Distribution/Dissemination 10 / 15 / 2014	
Mailing Address PO Box 7431		Amount 40000.00	
City Columbia	State SC	Zip Code 29202	Transaction ID : 003
Purpose of Expenditure Digital advertising	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: Pete Gallego		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 497320.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	361347.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Action Network

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2014	
Mailing Address 135 Professional Drive Suite 104		Amount 16311.68	
City Ponte Vedra Beach	State FL	Zip Code 32082	Transaction ID : 004
Purpose of Expenditure Mobile advertising	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: Pete Gallego		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 497320.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Arena Communications		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2014	
Mailing Address 1780 Sequoia Vista Circle		Amount 13495.00	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 005
Purpose of Expenditure Direct mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Ami Bera		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1074337.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29806.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	391154.06